## Haw River State Park Summer Day Camp Registration Form 2013

Name:	Rising Grade:	_ School Attending:	
Address:		_ Gender:	Date of Birth:
Parent or Guardian:			
Address:			
Home Phone:	Daytime Cell:		Email:
Additional Parent or Guardian: _			
Address:			
Home Phone:	Daytime Cell:		
T-shirt Size:	(Youth or Adult Sizes)		
Emergency Contact/Other adult	s with permission to pick up child	<u>l:</u>	
Name:	Phone:		
Relationship:			
Name:	Phone:		
Relationship:			
Media/Photography Permission			
I,, give Haw F promotional, and /or marketing material	River State Park, the permission to take ph ls.	notographs or video	o of my child for use in educational,
I,, do not give educational, promotional, and /or marke	e Haw River State Park, the permission to eting materials.	take photographs	or video of my child for use in
	Summer Day Camp	<u>os</u>	
Week I Beak Week  June 17 <sup>th</sup> – 21 <sup>th</sup> Age: (rising 2 <sup>nd</sup> –6 <sup>th</sup> graders)  Fee: \$115/participant/week	Age:	<b>Week II E</b> 24 <sup>th</sup> – June 28 <b>(rising 2<sup>nd</sup> –6<sup>th</sup></b> \$115/participe	graders)
Ju	eek II Haw River Adventure Cone 24 <sup>th</sup> – 26 <sup>th</sup> ge: (rising 7th –8 <sup>th</sup> graders)		2, 550

Age: **(rising 7th –8<sup>th</sup> graders)** Fee: \$75/participant/week

**Send completed forms to:** Haw River State Park

The Summit Environmental Education Center

Summer Day Camps

339 Conference Center Drive Browns Summit, NC 27214

Phone:336.342.6181/342.6163 Fax: 336.342.0583 Email:hawriver.program@ncparks.gov